# 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

### DOCUMENT# L12000155497

Entity Name: REJUVENETICS, LLC

## **Current Principal Place of Business:**

14101 NW 4 STREET SUNRISE, FL 33325

## **Current Mailing Address:**

14101 NW 4 STREET SUNRISE, FL 33325 US

# FEI Number: APPLIED FOR

### Name and Address of Current Registered Agent:

RILEY, PATRICIA A 14101 NW 4 STREET SUNRISE, FL 33325 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

### SIGNATURE: PATRICIA A RILEY

Electronic Signature of Registered Agent

### Authorized Person(s) Detail :

Title	MGR
Name	RILEY, PATRICIA
Address	14101 NW 4 STREET
City-State-Zip:	SUNRISE FL 33325

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PATRICIA A RILEY

CEO

04/22/2020 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 22, 2020 Secretary of State 3144994631CC

Certificate of Status Desired: No

04/22/2020 Date